PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

CATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notifica	correspondence including ed below or directed other	o the	Patent advance or	ders and notification	of n	naintenance fees w spondence address;	and/or	mailed to the current (b) indicating a sepa	rate "FEE	ence address as ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
SILVERBROOK RESEARCH PTY LTD 393 DARLING STREET BALMAIN, NSW 2041 OCI 1 2 2006 .						Certificate of Mailing or Transmission I hereby certify that this Fec(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
AUSTRALIA	\$	(Depositor's name)									
	PADEMARY.	(Signature)									
				(Date)							
APPLICATION NO.	FILING DATE			FIRST NAMED INVENT		R ATTO		RNEY DOCKET NO.	CONFIRMATION NO.		
10/659,023		Kia Silverbrook DEVICE WITH INTEGRAL INTERNA			AP88 4227						
APPLN. TYPE	SMALL ENTITY	199	SUE FEE DUE	PUBLICATION FEE D	OUE.	PREV. PAID ISSUI	FFF	TOTAL FEE(S) DUE	T DA	TE DUE	
	NO	13.	\$1400	\$300		\$0		\$1700		/30/2006	
				, -		7		\$1700	10	30,2000	
			ART UNIT	CLASS-SUBCLASS	š :						
GIBBS, HEATHER D 2625				358-473000	tha m	stant front mage lie	.+				
. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME A	ND RESIDENCE DATA	то в	E PRINTED ON T	HE PATENT (print of	or typ	oe)					
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment 13/2006 NAHED2 (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)											
				Ralmain	NIS	AN A SILECTION	91	KI)	1400.0		
Silverbrook Research Pty Ltd Daimani, NS W, Age 46:1504 300.00 0P											
Please check the appropr	iate assignee category or	catego	ries (will not be pr	inted on the patent):		Individual Co	rporati	on or other private gro	up entity [Government	
Ala. The following fec(s) are submitted: Size Fec Publication Fec (No small entity discount permitted) Advance Order - # of Copies				b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).							
_ ` .	tus (from status indicate										
a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in											
nterest as shown by the records of the United States Patent and Trademark Office.											
Authorized Signature	<u>ull</u>			<u></u>		Date) F	MGUST ZC	06		
Typed or printed name	~ IKIA 8	u	e e e e e e e	_		Registration N	o.				

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.